## State of New Mexico Energy, Minerals and Natural Resources Department

<u>DISTRICT I</u>	OIL CONSERVA	ATION DIVIS	ION				
1625 N. FRENCH DRIVE, HOBBS, NM 88240	310 Old Santa Fe Trail, Room 206 Santa Fe, New Mexico 87503			WELL API NO. 30-025-05540			
Salita Fe, New Iviexico 8/303				5. Indicate Type of Lease			
•				FED	STATE	X FEE	
				6. State Oil &	Gas Lease No.		
	, k						
SUNDRY NOTICES AND REPORTS ON WELLS							
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"				7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT			
(FORM C-101 F	FOR SUCH PROPOSALS.)			NORTH	DDS (GISA) (	71111	
1. Type of Well: Oil Well	as Well Other	1					
2. Name of Operator OCCIDENTAL P		emporarily Abandon	rea	8. Well No.	321		
					321		
3. Address of Operator 1017 W. STANOLIND RD.				9. Pool name or Wildcat HOBBS (G/SA)			
				nobbs (G/	5A)		
4. Well Location					·		
Unit Letter G: 1650 Fee	t From The NORTH	Line and 1650	Feet	From The	EAST	Line	
Section 36	Township 18-S	RANGE	37-E	NM	 PM	LEA Co	ounty
	Elevation (Show whether DF, F	RKB, RT GR, etc.)					
11. Check Appr	ropriate Box to Indicate 1	Nature of Notice, I	Report, o	or Other Data	<i>VIIIIIIIIIIIIIIIII</i> a		
NOTICE OF INTENTION	ON TO:		SUBS	SEQUENT R	EPORT OF:		
PERFORM REMEDIAL WORK PLUC	AND ABANDON	REMEDIAL WORK			ALTERING	CASING	
TEMPORARILY ABANDON CHAI	NGE PLANS	COMMENCE DRIL	LING OP	NS.	PLUG & AP	BANDONMEN	TV
PULL OR ALTER CASING		CASING TEST AND	O CEMEN	т ЈОВ			
OTHER:		OTHER: Casing	Integrity	Test – TA sta	itus		X
12. Describe Proposed or Completed Operations (Clework) SEE RULE 1103.	arly state all pertinent details,	and give pertinent date	es, includin	g estimated dat	e of starting any	proposed	
TEST DATE: 05/12/05							
PRESSURE READING: INITIAL - 600 P	SI; 15 MIN – 600 PSI; 30 N	MIN – 595 PSI			-100		
	MIN			3031	1237		
	IVIIIV			/63° \			
TEST WITNESSED: YES				$\sqrt{2}$	4 1 G		
		,	/	5262)		N:	
This A.	arayal of Tampar	ory - / - /	/ / m	18 6	10 M	₹/	
I nis-Ap	proval of Tempora onment Expires	1/2/16	10	i i i i i i i i i i i i i i i i i i i	0,	35/	
Abando	MINICITE EXPIRED ASSE			₹6≥,	>	8 <sup>5</sup> /	
					505er8rp		
I hereby certify that the information above is true and	complete to the best of my know	ledge and belief.					
SIGNATURE STORY (4)	20.11	TITLE ENGR					
TYPE OR PRINT NAME STEVE W JONES	goras	TITLE ENGIN	EERING		DATE	05/25/05	
(This space for State Use)	- A				LEPHONE NO.	505/397-8	228
$\mathcal{A}$	4.1.1.1	EPRESENTATIVE	11/STAF	F MANAGE	R		
CONDITIONS OF APPROVAL IS	OC FIELD F	EPRESENTATIVE	11/31/11	-	DATE	MW A A	
CONDITIONS OF APPROVAL IF ANY:					. 1	MAY 3 0	2005

